TRANSMITTAL FORM (to be used for all correspondence after initial filing)

Sent via Express Mail Label No.:

Application Number	09/955,924
Filing Date	September 19, 2001
First Named Inventor	Huitema
Group Art Unit	2131
Examiner Name	Longbit Chai
Attorney Docket Number	177765.01

ENCLOSURES (check all that apply)									
Fee Transmittal Form (in duplicate) Fee Attached Amendment / Reply (23 pages) After Final Affidavits/declaration(s) Extension of Time Request		(for a Draw Decla □ No	copy from a prior a			After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
□ Express Abandonment Request □ Information Disclosure Statement with Form PTO/SB/08A (pages) □ Response to Notice to File Missing Parts □ A copy of the Notice to File Missing Parts Under 37 CFR 1.52 or 1.5 CERTIFICATE OF MAILING OR TRANSMISSION (Under 37 CFR § 1.8(a)) I hereby certify that this correspondence is being: ☑ deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop After Final, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450; or □ transmitted by facsimile on the date shown below to the USPTO at (703) July 11, 2005 Date Signature Carole Boelitz				Proprietary Information Status Letter Application Data Sheet Request for Corrected Filing Receipt Return Receipt Postcard Other Enclosure(s) (please identify below): Copy of this Transmittal form; Creby authorized to charge any additional everpayments, to Deposit Account No. 50-patent application.					
Printed Name SIGNATURE OF ATTORNEY OR AGENT									
Signature Coulder	ı. No.	48.958		· -					
Name of Attorney or Agent	role Boelitz								
Date July 11, 2005	Tel.		(425) 722-6035		Fa	csimile No.	(425) 708-5046		
Assignee Name:			MICROSOFT CORPORATION ONE MICROSOFT WAY REDMOND, WA 98052						
Customer Number:	22971								



Effective on 12/05/04
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Complete if Known					
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Express Mail Label No.	N/A				

FEE TRANSMITTAL For FY 2005			Filing Date	September 19, 2001					
			First Named In	Huitema					
			Examiner Nam	Longbit Chai					
□ Applicant claims small e	ntity status	See 37 CFR 1.2	7	Art Unit			2131		
☐ Applicant claims small entity status. See 37 CFR 1.27				Attorney Docke	177765.01				
TOTAL AMOUNT OF PAYMENT (\$) 0.00				Express Mail La	abel No.		N/A		
METHOD OF PAYMENT	(check all t	hat apply)							
Check Credit Car	d 🗌 M	oney Order	☐ No	ne 🗌 Other	(please identif	y) <u>:</u>			·
□ Deposit Account Deposit	osit Account N	lumber: <u>50-04</u>	<u>63</u>	Deposit Acc	count Name: M	ICROSC	FT CO	RPORA	TION
For the above-identifie	ed deposit ad	count, the Direct	or is her	eby authorized to:	(check all tha	it apply)			
☐ Charge fee(s) in ☐ Charge any addi under 37 CFR 1.	tional fee(s) .16 and 1.17	or underpayment		s) 🔯 Cre	arge fee(s) ind dit any overpa	ayments	•		
WARNING: Information on the information and authorization			Credit ca	ird information sh	iould not be i	ncluded of	n this for	m. Provia	e credit card
FEE CALCULATION									
1. BASIC FILING, SEA	RCH, AN	D EXAMINA	TION F	EES					
	FILING F		SEAR	CH FEES	EXAMINA				
Application Type	Fee (\$)	nall Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Fee (\$)	<u>city</u>	Fees P	aid (\$)
Utility	300	150	500	250	200	100		0	
Design	200	100	100	50	130	65	_		
Plant	200	100	300	150	160	80	_		
Reissue	300	150	. 500	250	600	300	-		
Provisional	200	100 .	. 0	0	0	0		0	
2. EXCESS CLAIM FEES Fee Description	3							Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for I	Reissues, e	ach claim over	20 and	more than in th	e original pa	tent		50	25
Each independent claim ov	er 3 or, for	Reissues, eac	h indep	endent claim m	ore than in th	ne origina	ıl patent	200	100
Multiple dependent claims								360	180
	xtra Claims			Paid (\$)	Multiple D			(6)	
24 - 25 or HP= 0 HP = highest number of total cla	ims paid for, i	x 50 coreater than 20	= 0		Fee (\$) 0		ee Paid (ক্য	
Indep. Claims Ex	tra Claims	Fee (\$)		Paid (\$)					
8 -8 or HP= 4 HP = highest number of indep	endent claim	x 200 s paid for, if great	= 0 er than 3						
 APPLICATION SIZE If the specification and dr. for each additional 50 she 	awings exce	ed 100 sheets of on thereof. See 3	paper, th	ne application size . 41(a)(1)(G) and	e fee due is \$2 37 CFR 1.16	250 (\$125 : (s).	for small	entity)	
Total Sheets	Extra Sheet	<u>Number</u>	of each	additional 50 c	r fraction th	ereof F	ee (\$)	Fee	Paid (\$)
-100 =	0	/ 50 = 0		_ (round up to a	whole) numl	oer x _	250	_ =	0
4. OTHER FEE(S)								Fee	s Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)								0	
Other:									0
HIRMITTEN BY									

(**)**

SUBMITTED BY			
Signature	Cardelator	Registration No. (Attorney/Agent) 48,958	Telephone (425) 722-6035
Name (Print/Type)	Carole Boelitz		Date July 11, 2005

First Named Inventor: Huitema

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22971

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Group Art Unit: 2131

Examiner: Longbit Chai Confirmation Number: 9394

Title: PEER-TO-PEER-NAME RESOLUTION PROTOCOL (PNRP) GROUP SECURITY INFRASTRUCTURE

AND METHOD

Commissioner for Patents
Mail Stop Amendment
P.O. Box 1450
Alexandria VA 22313-1450

Response under 37 C.F.R. § 1.111

Sir:

Please change the attorney docket number to 177765.01

Applicant respectfully responds to the Office Action mailed May 10, 2005 as

follows:

Listing of Claims begins on page 4 of this response.

Remarks begin on page 12 of this response.

Type of Response: Amendment after FINAL

Application Number: 09/955,924 Attorney Docket Number: 177765.01

Filing Date: 09/19/2001